

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

T2

JCS 103
94+5-10-60
10/11/8

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 : Restricted O Objection

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	11/4/60	51		100	
2	11/4/60	52		101	
3	11/4/60	53		102	
4	11/4/60	54		103	
5	11/4/60	55		104	
6	11/4/60	56		105	
7	11/4/60	57		106	
8	11/4/60	58		107	
9	11/4/60	59		108	
10	11/4/60	60		109	
11	11/4/60	61		110	
12	11/4/60	62		111	
13	11/4/60	63		112	
14	11/4/60	64		113	
15	11/4/60	65		114	
16	11/4/60	66		115	
17	11/4/60	67		116	
18	11/4/60	68		117	
19	11/4/60	69		118	
20	11/4/60	70		119	
21	11/4/60	71		120	
22	11/4/60	72		121	
23	11/4/60	73		122	
24	11/4/60	74		123	
25	11/4/60	75		124	
26	11/4/60	76		125	
27	11/4/60	77		126	
28	11/4/60	78		127	
29	11/4/60	79		128	
30	11/4/60	80		129	
31	11/4/60	81		130	
32	11/4/60	82		131	
33	11/4/60	83		132	
34	11/4/60	84		133	
35	11/4/60	85		134	
36	11/4/60	86		135	
37	11/4/60	87		136	
38	11/4/60	88		137	
39	11/4/60	89		138	
40	11/4/60	90		139	
41	11/4/60	91		140	
42	11/4/60	92		141	
43	11/4/60	93		142	
44	11/4/60	94		143	
45	11/4/60	95		144	
46	11/4/60	96		145	
47	11/4/60	97		146	
48	11/4/60	98		147	
49	11/4/60	99		148	
50	11/4/60	100		149	
				150	

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)